

TEXAS DEPARTMENT OF LICENSING AND REGULATION

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www.license.state.tx.us · cs.air.conditioning@license.state.tx.us**COMBINED CHECK WORKSHEET**

Contact Information

Name			
Address			
Telephone		E-Mail	

	APPLICANT NAME	Registered Technician	Certified Technician
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
	Add up each column		
	Multiply by Fee	\$20	\$35
	Total fee due for each license type		

CHECK NUMBER**TOTAL DUE**

Use this worksheet to submit one check to pay the fees for up to 20 applications. List each applicant's name and mark the license type they are seeking in the appropriate column. Add all the fees due and submit one check in that amount along with all the applications. Refer to license application and/or renewal form for exact fee amount. Please note that if the names listed on this worksheet do not match those on the applications submitted, or if the check is not for the correct amount, the applications will not be processed and the entire packet will be returned.